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Bib Data Sheet

CONFIRMATION NO. 2984

SERIAL NUMBER 09/893,523	FILING OR 371(c) DATE 06/29/2001 RULE	CLASS 725	GROUP ART UNIT 2614	ATTORNEY DOCKET NO. 1076.40323X00
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\*****\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

\*\* 08/20/2001

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY SWEDEN	SHEETS DRAWING 5	TOTAL CLAIMS 30	INDEPENDENT CLAIMS 6
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

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**TITLE**

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FILING FEE RECEIVED 1260	<p>FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> All Fees</li> <li><input type="checkbox"/> 1.16 Fees ( Filing )</li> <li><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )</li> <li><input type="checkbox"/> 1.18 Fees ( Issue )</li> <li><input type="checkbox"/> Other _____</li> <li><input type="checkbox"/> Credit</li> </ul>
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